**CLHO Healthy Structures Committee Meeting**

February 23rd, 2015

*In attendance*

Committee Members: Pam Hutchinson (Co-Chair), Pat Crozier (Co-Chair), Melissa Ney, Karen Woods, Erin Mowlds

CLHO Staff: Kathleen Johnson

State staff: Danna Drum, Jan Kaplan, Jill Brackenbrough

Guests: Mike Harryman, Vicki Guinn

*Not attending:* Cindy Baskerville, Terra Franken, Jenna Lorenzen, Claire Smith

*Comments or corrections of minutes*

Correct page 3, Charlie Foutain spelling of last name, not Fountain. Update Rick’s spelling of his name and spelling of Melissa Ney.

Motion and 2nd accepted: accept minutes as written with corrections

*EP Funding Program Element 9*

Mike Harryman

Health Security Preparedness and Response (HSPR)

* + April 1-June 30th Budget Period on first page of PE9 document under 2A is incorrect. (Actually 18 months period). Mike will correct this time frame.
	+ This is supplemental money from Congress for Ebola and Public Health emergency preparedness with $900 thousand dollars allocated to Local Health Departments.
		- Mike presented to the CLHO subcommittee 3 weeks ago with the draft PE9.
* 3 funding tables: 1). 100% Population 2). $5k base 3). $10k base
* The Subcommittee agreed unanimously on the 5K base and submitted to CLHO
* KJ asked the process for coming to the $5k base?
	+ KW answered that they decided $10k base was too much and that the counties couldn’t do anything with no base.
		- PH asked if the period is over 18 months, is each county going to be assigned to a certain amount of money and bill against it?
* Yes, this is a one-time project that the CDC is doing. Hoping that the counties will agree with the amount and will bill the state – OHA/DHS will apply the bills to the budget amount
	+ - Pat asked if there is any retro?
* CDC will start this around April 1st and it is not retroactive. Ebola supplement came on Friday.
	+ - Pat also asked if the County will have to submit work plans for this budget?
			* Yes, on the back of PE9 is a very simple template to discuss the budget to work out with the HSPR program.
		- Our charge for this committee is to decide if we approve recommendation with the $5k base.
			* All funding formulas are to come through this committee
			* The fairest distribution was $5k per county.
			* The Public Health Lab is ramping their ability to test for Ebola
			* Only State Labs are able to do Ebola testing.
			* Not ready to determine the preparedness dollars in regards to the tribes
			* The funding covers everyone in the Public Health Division.

Motion: to accept/agree/concur with the recommendations to accept the $5k base + per capita

2nd

All in favor accepting the motion.

*Triennial Review Quality Improvement Steering Committee Update*

Kathleen Johnson

CHLO

Overview

* + They met and came up with the aim and scope for the committee.
	+ Reviewed the current process map provided by the Office of Community Liaison
	+ Discussed Current objectives and started thinking about future objectives.
	+ Wanted to ask the program staff involved in the program review process questions.
* Pat asked if there is a survey?
* These results are driving the quality improvement process and being used throughout.
* Danna commented that Matt Gilman is working on Gov Space for interaction. This is available on the Community Liaison and will be available on the CLHO web page.
* Came up with common themes within the comments from the survey to help drive the process.
* The first meeting was to look at the data.

*DIS Update*

Pat

* + - Funding is decreased but the workload has not.
		- Starting July the DIS will be available to all the counties throughout the state but, they will have to show proof of case work attempt prior to receiving help.
		- More things will roll into the CCO and more resources outside of that will be shrinking.
		- JK shared that part of the DIS is being shrunk back is due to reduced funding from the Feds.
		- DD mentioned that Priscilla spoke at CLHO about having a larger conversation about this with the CCOs
		- Looking at it as a health system rather than PH work
* Healthy Structures Committee will remain updated for the work that they are doing—Leadership funding group that is a JLT subcommittee
	+ Standing agenda item for an update from the Leadership funding group to be added at each Healthy Structures Meeting.
	+ Kathleen will send out a link to the group with a fact sheet for the funding—a priority this year for CLHO.

*SWOC ANALYSIS: Revisit the work done at the retreat*

Pat

* + - Strengths
			* Strengths section discusses recruitment of people, in-person meeting (annual retreat) and funding.
			* Annual retreat date, the annual report is due in October this is an AGENDA ITEM TO REVISIT at the end of summer
			* The template was nice.
		- Weaknesses
* Need onboarding for new members with a possible refresher to understand all of the pieces and how they connect.
* Agenda and Minutes distribution need to be timely.
* The group agreed to post all of the links rather than attachments on the CLHO website.
* Opportunities
	+ - * Using technology, skype, and GoTo meeting
			* Triennial Review Quality Improvement project
			* Funding principal between PHD and locals
			* Onboarding for new committee members.
* Nuances
* Interest in learning about work that Local Health Departments do via a lens of a particular program. Use this as an opportunity to discuss the individual county work based on the program.
* Looking at formulas, what may look small to PHD might look different to the local-level.
* Overview of Local PH
	+ Relates to all committees are supposed to put agenda and minutes on their website—make sure that Pat/Pam connect with the co-chairs so that the committee can be informed at the program level.
	+ Webmaster for committee page-will be talking off line with Erin
	+ Co-chair working with Liaison to help update committee
* Community Liaison will be attending all of the CLHO committees again. Requesting to have the other CLHO committees to notify the Community Liaison if there is a PE or funding formula.
	+ Reviewing the program elements
* Working on our process.

 *PH workforce development workgroup plan*

Vicki Guinn

Vicki’s group went over accomplishments from the 2013 Oregon training needs assessment as a starting point. Identified gaps in training and development to discover competencies

Recommendations

* Create a learning culture
* Reviewed environmental scan of existing training resources and noted gaps
* Healthy structures committee will provide oversight and guidance over these workgroup recommendations
* Address individual proficiency
* Self-assessment
* Aggregate results to id workforce strengths and weaknesses
* Collect baseline data for measuring over time
* Continue Core competency
* Funding
* Aligning this work with PHD strategic plan and Modernization of PH
* Support new mentor program for new local PH leaders
* These recommendations will support the state, local, and tribal public health workforce development plan documentation needed for those seeking PHAB accreditation.

KJ asked, what is your vision of oversight and how does this committee have a role in that?

* + Sharing resources
	+ Best or promising practices that local health department leaders are doing
	+ LHD – the workforce development can be accountable to CLHO in the services.
	+ LHD sharing slots across systems in sharing training.
		- New employee training.
			* For example: Multnomah County has a leadership training called Facilitated Leadership. Will they let someone from another county take one of those slots?
	+ A low stakes way of working together to see if we can work together on sharing this?
		- If there are trainings that are open we can put them on the web for the counties to see if someone would like to take the training.
		- Feedback from this group would be helpful
		- A calendar created with major events that are scheduled, and some way to have small events that are available maybe if someone would to see training opportunities.
		- We have to make sure that the trainings are cross referenced with a planning calendar. Hopefully will be done in the next few months. Will be coming back to ask for feedback from this group as to what it looks like.
		- Cultural competency
		- Will take time to build this and begin at competency gaps first. That will be the foundation for this training catalog/agenda.

KJ asked: Are you developing a work-plan on how to make these actionable and are you going to share with this committee?

 Yes. Some of these are long-term and we can make the tools available.

* + - Request to continue updates with this committee on the progress of the work
		- Recommendation: looking at cultural competency training utilized NAACHO’s Roots of Health on Equity is a resource.

Table “Review the charter” until next meeting

*Evaluation of GoTo meeting*

* + Positive result
	+ Very helpful
	+ Liked having the documents on the screen

*Future agenda items*

* + Finish SWOC work
	+ Review the charter
	+ Standing committee reports from the Triennial Review Quality Improvement Committee, Workforce Development, JLT Leadership Funding Committee, and Civil rights tool.
	+ Danna shared that she heard from health departments while looking for documentation for accreditation some items were not branded right. DD drafted an email and sent it to JK to send out to the local health department administrators. If you have specific accreditation documents that you need packaged correctly, please send to DD specifically and she will work on branding correctly. Administrators need a point contact person specific to branding and getting a document reformatted, DD will work with folks to get it formatted correctly. Jan will send out the email about branding.
	+ JK asked to have review of new Civil Rights Tool Draft on the March agenda.

*Next meeting*

 March 23rd 2015.

Meeting adjourned.